

How do I qualify for PACE?

WHO IS ELIGIBLE?

- Those who are 55 or older.
- Older adults who live in a PACE service area.
- Kansans certified by the State as needing a nursing home level of care.
- Residents who can live safely in the community with the help of PACE services.

Where can I get more information?

Current PACE Providers:

Via Christi HOPE: if you live in **Sedgwick County**
Call **316-858-1111**

Midland Care Services: if you live in **Douglas, Jackson, Jefferson, Osage, Shawnee, Pottawatomie or Wabaunsee Counties**
Call **785-232-2044**

**Kansas Department for
Aging and Disability Services**

503 S. Kansas Avenue
Topeka, KS 6603-3404

Phone: 785-296-8288

Fax: 785-296-0256

<http://www.kdads.ks.gov/>

[LongTermCare/PACE/PACE Index.htm](#)

July 2014



PACE



**Program of
All-inclusive Care
for the Elderly**

PACE Programs of All-Inclusive Care for the Elderly

What is PACE?

The Program of All-Inclusive Care for the Elderly (PACE ®) is designed for seniors with chronic care needs and their families to allow qualified individuals the opportunity to remain in the community for as long as possible.

PACE: a different kind of care

PACE is care that revolves around you. PACE was created as a way to provide you, your family, caregivers and professional health care providers the flexibility to meet the health care needs of elderly adults and to help them to continue living in their communities.

How PACE Benefits Consumers

PACE Provides Comprehensive Care:

PACE uses Medicare and Medicaid funds to cover all medically necessary care and services. Consumers can be enrolled in either Medicare or Medicaid, or both, to join PACE. They can also pay for PACE privately, if they do not have Medicare/Medicaid.

The Focus is on the Consumer:

A team of health care professionals will help participants make decisions to ensure a good quality of life. The consumers and their families will play an active role as the team develops and updates plans of care and goals for the program.

PACE Support Family Caregivers:

PACE provides care-giving training, support groups and respite to help families keep their loved ones in the community.

Paying for PACE

If consumers have Medicaid, they will not have to pay a monthly premium for the long-term care portion of the PACE benefit. If they don't qualify for Medicaid but have Medicare, they will be charged a monthly premium to cover the long-term care portion of the PACE benefit and a premium for Medicare Part D drugs. Participants also are responsible for their Medicare Part B premium. However, in PACE there is never a deductible or co-payment for any drug, service or care that has been approved by the PACE Interdisciplinary Team.

PACE BENEFITS:

- Primary Care Physician
- Nursing
- Hospital Care
- Medical Specialty Services
- Prescription Drugs
- Nursing Home Care
- Emergency health services
- Home Care
- Physical Therapy
- Occupational Therapy
- Adult Day Care
- Recreational Therapy
- Meals
- Dentistry
- Nutritional Counseling
- Social Services
- Laboratory/X-ray Services
- Social Work Counseling
- Transportation
- Other services (determined to be necessary by the PACE Interdisciplinary Team to improve and maintain the person's health)